

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

UTILITY PATENT APPLICATION TRANSMITTAL FORM

(only for new nonprovisional applications under 37 CFR 1.53(b))

ASSISTANT COMMISSIONER FOR PATENTS

Washington, D.C. 20231

BOX: PATENT APPLICATION

SIR:

Transmitted herewith for filing is the patent application (including Specification, Claims, Sequence Listing (if applicable) and Abstract, 50 pages) of:

Inventor(s): **Vivian E. Mack-Strong, Philip P. Stapleton, and John M. Daly**

For : **USE OF COX-2 INHIBITORS TO TREAT SEPSIS, COMPLICATIONS THEREOF, AND EP RECEPTOR MODULATION**

***If a CONTINUING APPLICATION, please mark where appropriate and supply the requisite information below and in a preliminary amendment:*

☐ Continuation ☐ Divisional ☐ Continuation-In-Part (CIP)
of prior application Serial No. _____

Prior application information: Examiner :
Art Unit :

Enclosed are:

☒ **24** sheets of informal drawings.

☐ **Signed** Combined Declaration and Power of Attorney (____ pages).

☐ **Copy of signed** Combined Declaration and Power of Attorney (____ pages) from a prior application (1.63(d) (for continuation/divisional).

☐ **Signed** statement deleting inventor(s) named in prior application (____ pages) (1.63(d)(2) and 1.33(b)).

☐ **Incorporation By Reference:** The entire disclosure of the prior application, from which a **copy** of the oath or declaration is supplied herewith, is considered as being part of the disclosure of the enclosed application and is hereby incorporated by reference therein.

☐ Assignment (____ pages) of the invention to _____.

☐ Assignment Transmittal Letter.

☐ Certified copy of a foreign priority document.

☐ Associate power of attorney.

☒ Applicant claims small entity status. (See 37 CFR 1.27.)

02/14/01
31046 U.S. PTO

10/11/02
09/782936
10441 U.S. PTO

- ☐ Preliminary Amendment (____ pages).
- ☐ Information Disclosure Statement, form PTO-1449 (____ pages) and ____ references.
- ☒ **UNSIGNED** Combined Declaration and Power of Attorney (2 pages).
- ☐ Statement in Accordance with 37 CFR § 1.821(f) and computer readable 3.5" Diskette.
- ☒ A self-addressed, prepaid postcard acknowledging receipt.
- ☐ Other:



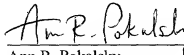
The Filing fee has been calculated as shown below:

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FOR:	NO. FILED	NO. EXTRA	RATE	FEE		RATE	FEE
BASIC FEE	XXXXXXXX	XXXXXXXX	XXXX	\$355	OR	XXXX	\$710
TOTAL CLAIMS	24 - 20 =	4	x 9 =	\$36	OR	x 18 =	\$
INDEP CLAIMS	5 - 3 =	2	x 40 =	\$80	OR	x 80 =	\$
<input checked="" type="checkbox"/> MULTIPLE DEPENDENT CLAIM PRESENTED			x 135 =	\$135	OR	x 270 =	\$
*If the Total Claims are less than 20 and Indep. Claims are less than 3, enter "0" in Col. 2			TOTAL	\$606	OR	TOTAL	\$

- ☐ Please charge my Deposit Account No. _____ in the amount of \$ _____. **A duplicate copy of this sheet is enclosed.**
- ☒ A check in the amount of **\$606.00** to cover the filing fee is enclosed.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 14-1138. **A duplicate copy of this sheet is enclosed.**
- ☒ Address all future communications to:

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